								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003											227	9	
CLAIMS AS FILED - PART I									NTITY		OTHER	THAN	
			(Column 1) (Co			mn 2) TYPE				OR	SMALL		
TOTAL CLAIMS							ſ	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 375.00	OR	BASIC FEE	7 50.00	
TOTAL CHARGEABLE CLAIMS			minus 20=		*			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =					X42=		OR	X84=		
MU	LTIPLE DEPEN	DENT CLAIM PF	resent 			+140=			OR	+280=			
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL		
M	(Column 1) (Column 2) (Column 3)							, SMAII	. ENTITY	OR	OTHER SMALL I		
\vdash	(Column 1) CLAIMS				ımn 2) (C6lumr HEST		٦ r	OMALI	ADDI-	I 1		ADDI-	
MTA		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL	7	RATE	TIONAL	
AMENDMENT	Total	* 5	Minus	***	0	- 🔿	1	X\$ 9=	1/	OR	X\$18=		
AME	Independent	• 2	Minus	***	3	=0		X42=	/	OR	X84=/		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+140=		OR	+280=			
							ļ	TOTA ADDIT. FE		OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)										•			
AMENDMENT B		CLAIMS REMAINING		_	HEST MBER MOUSLY DFOR	PRESENT EXTRA		RATE	ADDI-		RATE	ADDI-	
		AFTER AMENDMENT		PREVI					TIONAL FEE			TIONAL FEE	
	Total	*	Minus	**	TON	=	11	X\$ 9=	1.55	OR	X\$18=	1 1-1-	
Ä	Independent	*	Minus	***		=	1	X42=	 		X84=		
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							746-	 	OR			
								+140=		OR	+280=		
	ADOIT. FEE									OR	ADDIT. FEE		
	(Column 1) (Column 2) (Column 3)										_		
ပ		CLAIMS REMAINING		NUM	IEST IBER	PRESENT			ADDI-			ADDI-	
AMENDMENT C		AFTER AMENDMENT			FOR	EXTRA]	RATE	TIONAL FEE	1	RATE	TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Independent	*	Minus	***	<u> </u>	-	4	X42=		OR	X84=		
Ľ	FIRST PRESE	PENDEN	I CLAIM		J	.440	1	i	.000	 			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	<u> </u>	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE										OR	TOTAL ADDIT. FEE		
		nber Previously Pa					er fo	und in the a	appropriate bo	ox in co	olumn 1.		